L09000017809

Florida Department of State

Division of Corporations

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Fax Number : (850)617-6383

From:
Account Name : FRANK, WEINBERG, BLACK, P.L.
Account Number : I20040000083
Phone : (954)474-8000
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LLC REGISTERED AGENT CHANGE
UNIVERSAL MEDIQUIP, LLC

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Universal Mediquip, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anastasios Tom Spyredes, Esq.
Name of Person

Frank, Weinberg & Black, P.L.
Firm/Company

1800 North Military Trail, Suite 170
Address

Boca Raton, Florida 33431
City/State and Zip Code

tspyredes@fwblaw.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anastasios Tom Spyredes at (561) 395-3350
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☑ $25 Filing Fee ☐ $55 Filing Fee & Certified Copy

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Universal Mediquip, LLC

2. (a) Principal office address of limited liability company: 14545 J. Military Trail
Suite 102
Delray Beach, FL 33484

(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 14545 J. Military Trail
Suite 102
Delray Beach, FL 33484

(Note: MAY BE POST OFFICE BOX)

02/12/2009 — 3. Date of filing/registration in Florida

L09000017809 — 4. Document number

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5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Valerie Castrovinci

Registered Office Address: 14545 J. Military Trail, Suite 102
Delray Beach, FL 33484

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: Frank, Weinberg & Black, P.L.

NEW Registered Office Address: 1800 North Military Trail
(MUST BE FLORIDA STREET ADDRESS) Suite 170
Boca Raton, FL 33431

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Valerie Castrovinci
Signature of a member or authorized representative of a member

Valerie Castrovinci
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: $25.00

INHS18 (05/08)